



0922.000045.

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
	:	Examiner: P. Huntsinger
KENZO SEKIGUCHI)	
	:	Art Unit: 2624
Appln. No.: 09/918,499)	
	:	
Filed: August 1, 2001)	
	:	
For: COMMUNICATION)	
APPARATUS AND METHOD	:	
HAVING ELECTRONIC MAIL)	
COMMUNICATION FUNCTION,	:	
AND PROGRAM)	January 19, 2006

Mail Stop RCE
The Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

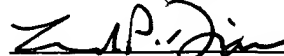
Sir:

In response to the Office Action dated October 19, 2005, please amend
the above-identified application as follows. The amendments to the claims are reflected in
the listing beginning at page 2, and the Remarks begin at page 9.

I hereby certify that this correspondence is being deposited with the
United States Postal Service as first-class mail in an envelope addressed
to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-
1450 on

January 19, 2006
(Date of Deposit)

LEONARD P. DIANA (Reg. No. 29,296)
(Name of Attorney for Applicants)


Signature

January 19, 2006
Date of Signature



In re Application of:

KENZO SEKIGUCHI

Appln. No.: 09/918,499

Filed: August 1, 2001

For: COMMUNICATION APPARATUS AND METHOD
HAVING ELECTRONIC MAIL COMMUNICATION
FUNCTION, AND PROGRAM

Docket No. 02922.000045.

Examiner: P. Huntsinger

Art Unit: 2624

Date: January 19, 2006

Mail Stop RCE
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

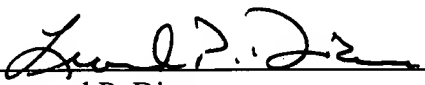
CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 23	MINUS	** 23	= 0	x \$25 \$50	\$0.00
INDEP. CLAIMS	* 3	MINUS	*** 3	= 0	x \$100 \$200	\$0.00
Fee for Multiple Dependent claims \$180°/\$360						\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0.00

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Patent and Trademark Office is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$_____ to cover the Extension fee for response with a ____-month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our New York Office by telephone at (212) 218-2100 or by facsimile at (212) 218-2200. All correspondence should continue to be directed to our address given below.


Leonard P. Diana
Attorney for Applicant
Reg. No.: 29,296

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